

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR SUPPLEMENTING THE EXPERIENCE OF A VISITOR TO A DISPLAY FACILITY OR OTHER PUBLIC SPACE

the specification of which:

(check one)

☐ is attached hereto;

☐ was filed on _____, and identified as Attorney Docket No. _____, and was amended on _____ (if applicable);

☐ was filed as United States Application Serial No. _____ on _____, and was amended on _____ (if applicable);

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above;

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information which is known to me to be material to the patentability of said invention in accordance with 37 C.F.R. §1.56;

I do not know and do not believe said invention was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to said application; that said invention was not in public use or on sale in the United States of America more than one year prior to said application; that said invention has not been patented or made the subject of an inventor's certificate issued before the date of said application in any country foreign to the United States of America on any application filed by me or my legal representatives or assigns more than six months prior to said application;

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

(Application Number)

(Filing Date) (day, month, year)

As a named inventor, I hereby appoint the registered practitioners of Cooley Godward LLP included in the Customer Number provided below to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith; I further direct that correspondence concerning this application be directed to:

COOLEY GODWARD LLP
 Attention: Patent Group
 One Freedom Square - Reston Town Center
 11951 Freedom Drive
 Reston, Virginia 20190-5601
 Tel: (703) 456-8000
 Fax: (703) 456-8100

CUSTOMER NUMBER:

022903



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: **Robert Lee Fitzsimmons, Jr.**

Inventor's signature _____

Date _____

Residence: 5030 Beach Drive SW
 Seattle, WA 98136

Citizen of: U.S.A.

Post Office Address: 5030 Beach Drive SW
 Seattle, WA 98136

Full name of second inventor:

Inventor's signature _____

Date _____

Residence:

Citizen of:

Post Office Address:

Full name of third inventor:

Inventor's signature _____

Date _____

Residence:

Citizen of:

Post Office Address: